

APPENDIX B(2)

On May 1, 1967, the United States Department of Health, Education and Welfare published the results of a national health survey on the subject of "Cigarette Smoking and Health Characteristics." In this report on Page 6 appears the following:

"The most these data can do is to demonstrate the lack of or the existence of a relationship between cigarette smoking and various health characteristics; it cannot establish any existing relationship as a causal one. If a relationship is found, there can be several possible explanations, for example: (1) smoking actually causes a certain condition (or is one of a number of causes), (2) the presence of a certain condition causes the person to smoke, or (3) some third factor, possibly psychologic or biologic, is causing both the condition and the smoking habit."

Several points from this most recent report are inconsistent with the cigarette causation hypothesis. These are:

1. The data reviewed shows that former smokers have higher rates than present smokers for most of the conditions reported on whether chronic or acute (Page 7 of Report).
2. The Report shows that men and women presently smoking, whose "heaviest amount" smoked was up to one

pack per day (estimated at 65.6% of the smoking population) had no more "all chronic conditions" than persons who have never smoked cigarettes (Table D, pp. 11).

3. The Report did not indicate that men and women presently smoking, whose "heaviest amount" smoked was up to two packs per day, had any more "heart conditions", "hypertension", "arthritis", "hearing impairments", or "all other chronic conditions", than people who never smoked (Calculated from Table D, pp. 11). The Report estimated that this group of smokers included 95% of the smokers in the population.

4. The Report says that "the present smokers who smoked up to a pack a day had a rate (of heart conditions) about the same as that for the 'never smokers.'" (Report, page 12)

5. Women smokers had significantly fewer heart conditions and hypertension than those who never smoked. (Calculated from Table 2, statistical calculations followed the methods outlined in Appendix I, pp. 56-61 of the Report).

6. The difference in health patterns, as reported in the survey between "present smokers", "former smokers", and "never smokers", suggests the possible validity of the author's statement that "some third factor, possibly psychologic or biologic is causing both the condition and the smoking habit", which is one of his suggested explanations (Report, pp. 6).

It is to be noted that in March of 1967, when members of the Public Health Service were testifying before the House Subcommittee of the Committee on Appropriations who request appropriation of funds for various research and study projects, not a great deal was reportedly known about "tar" and "nicotine". For example:

Dr. Stewart:

"... you are correct that there was no specific agent in cigarette smoke that can be specifically pointed to as the cause of lung cancer." (Part 4, p. 108)

Dr. Endicott:

"The amount of tar and nicotine in a cigarette may or may not relate very closely to the amount of tar and nicotine that ends up in a man's lungs because of the differences in smoking habits, the extent to which they inhale, the length they burn the cigarette. If you place a filter on a cigarette which, let's say, removes 40 percent of the tar and nicotine and then smoke five times as many, you are not getting anywhere.

"What I am saying is, low tar and nicotine content of itself does not assure that you are better off," (Part 5, p. 278)

Dr. Kotin, in answer to a question by Mr. Natcher:

"Now, what about nicotine; has nicotine from smoke been shown to cause any human disease that you know of?

"Dr. Kotin: Within the framework of a 'clean' experiment, as we say, I am unaware of any." (Part 5, p. 681)

Dr. Stewart:

"We also know that in cigarette smoke there are substances which are carcinogenic. We do not know which substance, and it probably may not be which one, it may be a body of substances, within the smoke which is specifically the etiological agent of lung cancer we are talking about. This is where we are at the present time." (Part 4, p. 61)

It is incongruous, therefore, that the Public Health Service members claimed a present lack of information and research data when seeking to demonstrate their need for an appropriation to conduct research relating to "tar" and nicotine, but the Federal Trade Commission in June of 1967 claimed sufficient information and data to assert that "tar" and nicotine in cigarettes are harmful and the content percent must be publicized to alert the consuming public.